



SANTA CLARA FIRE DEPARTMENT

FIRE PREVENTION AND HAZARDOUS MATERIALS DIVISION

1675 Lincoln Street, Santa Clara, CA 95050

PHONE: (408) 615-4970

FAX: (408) 241-3006



ALTERNATE MATERIALS AND METHODS APPLICATION

APPLICATION FOR THE USE OF ALTERNATIVE MATERIAL, ASSEMBLY OR MATERIALS, EQUIPMENT, METHOD OF CONSTRUCTION,
METHOD OF INSTALLATION OF EQUIPMENT OR MEANS OF PROTECTION

The provisions of the code are not intended to prevent the use of any material, alternate design or method of construction not specifically prescribed by the code, provided an alternate has been approved. Sufficient evidence or proof shall be submitted to substantiate any claim that may be made regarding its conformance.

The Fire Prevention and Hazardous Materials Division must make a finding that the proposed design is satisfactory and complies with the intent of the provisions of this code, and that the material, method or work offered is at least the equivalent of that prescribed in the code in quality, strength, effectiveness, fire resistance, durability and safety. All interpretations shall be in compliance with the intent and purpose of this code and shall not have the effect of waiving requirements specifically provided for in this code.

Submittal shall include, but not be limited to the following: A complete application, a minimum of two (2) copies of all documents supporting the justification statement in the request, and associated permit fees. Each request, address, or building shall require a **separate** permit application packet.

The undersigned hereby requests approval of the following:

Under the authority of: ☐ 2013 CFC, Section 104.9 ☐ 2013 CBC, Section 104.11

☐ 2013 CMC, Section 1.2.2 ☐ 2013 CEC, Section 89.102.2 ☐ 2013 CPC, Section 1.2.2

PROJECT INFORMATION: Alternate Materials & Methods FIR #: FIR - _____

ASSOCIATED FIR #: FIR - _____ ASSOCIATED BLD #: BLD - _____

Project Name: _____

Project Address: _____ City: _____ Zip Code: _____

Cross Street: _____ Name/Bldg.: _____

APPLICANT INFORMATION:

Applicant/Agent (Please Print): _____ Company: _____

Applicant/Agent Signature: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone(s): _____ Fax: _____

Cell #: _____ E-mail: _____

